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APPLICANTS Yuji Isoda, Kanagawa, JAPAN; Keiko Neriishi, Kanagawa, JAPAN; Atsunori Takasu, Kanagawa, JAPAN;														
** CONTINUING DATA *****														
** FOREIGN APPLICATIONS ***** JAPAN 2003-033850 02/12/2003														
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 05/08/2004														
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; vertical-align: top;"> Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged </td> <td style="width: 15%; vertical-align: top;"> STATE OR COUNTRY JAPAN </td> <td style="width: 10%; vertical-align: top;"> SHEETS DRAWING 2 </td> <td style="width: 10%; vertical-align: top;"> TOTAL CLAIMS 4 </td> <td style="width: 20%; vertical-align: top;"> INDEPENDENT CLAIMS 1 </td> </tr> <tr> <td colspan="2" style="text-align: center;"> <div style="display: flex; justify-content: space-around;"> <div style="border-top: 1px solid black; width: 40%; text-align: left;"> Examiner's Signature </div> <div style="border-top: 1px solid black; width: 20%; text-align: left;"> Initials </div> </div> </td> <td colspan="3"></td> </tr> </table>					Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY JAPAN	SHEETS DRAWING 2	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 1	<div style="display: flex; justify-content: space-around;"> <div style="border-top: 1px solid black; width: 40%; text-align: left;"> Examiner's Signature </div> <div style="border-top: 1px solid black; width: 20%; text-align: left;"> Initials </div> </div>				
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ADDRESS 23373 SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N.W. SUITE 800 WASHINGTON , DC 20037														
TITLE Radiation image storage panel														
FILING FEE RECEIVED 900	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%; vertical-align: top;"> FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: </td> <td style="width: 40%; vertical-align: top;"> <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit </td> </tr> </table>				FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit								
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